

GARBAGE PEOPLE: THE DE-ESSENTIALIZATION OF IMPAIRMENT IN LATE QING  
AND EARLY REPUBLICAN CHINA, 1872 - 1936

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## **ABSTRACT**

Dalvin Da Tsay: Garbage People: The De-Essentialization of Impairment in Late Qing and Early Republican China, 1872 – 1936  
(Under the direction of Michelle T. King)

This thesis attempts to tabulate a genealogy of medicalized bodies between the late Qing (c. 1842 – 1912) and early Republican (1912 – 1936) periods. As a preliminary exploration of impairment, it also contributes to formative historiographical debates on “disability” in Chinese history. Othered bodies, whether diseased or injured, exist both within and without the history of medicine. In premodern China, othered bodies are found in Confucian and Daoist texts, as well as period and dynastic histories. But these mentionings do not necessarily suggest ontological impairment, as differently-functioning persons are not always limited by their conditions. After Chinese and Western medicines came into dialogue with one another from the mid-nineteenth century onward, new ways of conceptualizing medical bodies arose in China. This process, as seen in the newspapers, magazines, and medical journals cited herein, bespoke a transitional ethos where Chinese and Western understandings of the human body both clashed and found synergy.

To my grandparents, thank you for your boundless love and support, even in your final days.  
Memories of you continue to inspire me.

## **ACKNOWLEDGEMENTS**

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## INTRODUCTION

One day, in 1857, Wang Tao 王韜 (1828 – 1897) paused in quiet acknowledgement of the searing pain running through his feet. With each step, the lines on his face grew deeper with agony. His hampered body undermined the stalwartness of his character—Confucian literatus, patriot, and reformer. Wang Tao dreamt of home, his native Suzhou, as he lumbered in the Shanghainese soil. A doctor was needed. A Chinese one, he thought. Such was his mistrust of Western healing, even as China stood on the eve of scientific medicine. The festering of his diseased feet soon made walking impossible, and a journey home unfeasible. Still, Wang Tao resisted, visiting many Chinese physicians of good repute, but to no avail. In his eyes, they were impoverished of skill, wanting only to empty his pockets of money. Uncertainty overcame him, robbing him of life's joys and pleasures. Just when all seemed hopeless, the director of the Renji Hospital (located next-door to his residence), medical missionary Benjamin Hobson, caught sight of Wang Tao's affliction. The latter's skepticism quickly gave way to praise, as Hobson's treatments cured him within months. From then on, Wang Tao's attitude towards Western medicine very much changed for the better, igniting in him a fervent curiosity for Western learning.<sup>1</sup>

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<sup>1</sup> Translated and paraphrased from Zhang Hailin (張海林), 弢園尺牘 [Letters of Wang Tao] (1880) in 王韜評傳 [Commentaries on the Biography of Wang Tao] (Nanjing: University of Nanjing Press, 1993), 37. The original text reads: “1857 年左右此病驟然加劇, 四处潰爛得使王韜無法行走。王韜沒有辦法, 只好回鄉治病。但是, ‘遍謁吳門名醫’的結果却是‘皆窮于技’弄得王韜為此不但‘阮囊錢盡’而且抑郁寡歡, 疑心‘是中有鬼’, ‘几无复有生人之乐’。有人建议王韜去看西医, 但王韜从来不信西医, 置之未理。一个偶然的機會, 主持上海仁濟醫院 (座落在墨海書館的隔壁) 的西医合信发现了王韜的脚病, 主动提出为他根治。王韜半信半疑地接受了治疗。未出数月, 顽疾。‘霍然若失...’”

The story of Wang Tao's suffering, and his subsequent recovery under the care of a Western medical missionary, embodies the energies and emotions that surrounded late Qing (c. 1842 – 1912) encounters with Western biomedicine.<sup>2</sup> But, more importantly, it relates an episode where biomedicine possibly changed the ontology of impairment in modern China. Wang Tao's elation, in other words, bespoke an escape from life as a potential *feiren*.

In premodern China, literary and cultural conventions often associated *feiren* (廢人, “garbage person/people”) with impaired bodies, effectively removing any implications of social agency that a person so labeled might possess.<sup>3</sup> Sociologist Emma Victoria Stone says the following of its first component, *fei* (廢): “*Fei* contains the meaning component ‘to expel’, hence it is used for ‘to do away with’, ‘to get rid of’, ‘waste’, ‘useless’, ‘decrepit’.”<sup>4</sup> Therefore, *feiren* is just as easily translated to mean “expelled person/people,” “person/people who have been gotten rid of,” or “wasted person/people.” Negative labels such as these find their roots in antiquity, and have only recently faded into the margins of linguistic expression. Other related terms such as *canfei* (殘廢, “deficient and expelled”) and *canji* (殘疾, “deficient and diseased”) appearing in conjunction with the character for ren (人, “person/people”) also dot the discursive landscape of the sources at hand. *Canfei* and *feiren* appear to be most worthy of scrutiny, if only for the fact

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<sup>2</sup> Scholars of Chinese medicine and science have long debated the appropriate use of “scientific” in reference to Chinese and Western medical knowledge. See Andrew Cunningham and Bridie Andrews, “Introduction: Western medicine as contested knowledge,” in *Western Medicine as Contested Knowledge*, Andrew Cunningham and Bridie Andrews, eds. (New York: Manchester University Press, 1997), 1 – 23; Zhou Xun, “The discourse of disability in modern China,” *Patterns of Prejudice* 36, vol. 1 (2002): 104 – 112; Benjamin A. Elman, *On Their Own Terms: Science in China, 1550 – 1900* (Cambridge: Harvard University Press, 2005); Howard Chiang, *After Eunuchs: Science, Medicine, and the Transformation of Sex in Modern China* (New York: Columbia University Press, 2018).

<sup>3</sup> “Garbage people” is borrowed from Matthew Kohrman, *Bodies of Difference: Experiences of Disability and Institutional Advocacy in the Making of Modern China* (Berkeley: University of California Press, 2005), 31.

<sup>4</sup> Emma Victoria Stone, “Modern slogan, ancient script: impairment and disability in the Chinese language,” in *Disability Discourse*, Mairian Corker and Sally French, eds. (Buckingham, UK and Philadelphia: Open University Press, 1999), 139.



that they combine the most severe descriptors of Chinese impairment. Together, the pair conveys the most essentialist conceptualization of impaired bodies in premodern China. At the turn of the twentieth century, however, Chinese medicine underwent a decades-long process of scientification. This transformation, which echoed other contemporary discourses of modernity and nationalism, also impinged on Chinese concepts of the body.

### Historiography

Over the past decade, scholars of medical modernity (e.g. Larissa Heinrich, Bridie Andrews, Howard Chiang) have written extensively on the effects of Western medical science on the Chinese medicalized body.<sup>5</sup> These works all acknowledge the significance of Western biomedicine as a catalyst for changes in Chinese views of the body, but none see it as a discourse that fully supplants earlier Chinese sensibilities. The co-evolution of Chinese medicine and Western medicine in China is understood as a critical phenomenon at the center of changing conceptualizations of the medicalized body. These shifts in thinking about medicalized bodies perhaps sparked similar reconceptualizations of impairment. Therefore, impairment in modern China is not truly understandable without acute knowledge about the creation of medicalized bodies in general. The “scientized” medical body in early twentieth-century China cannot itself be fully comprehended, moreover, without acknowledging historical interactions between Chinese and Western medicines.

Initial attempts at historicizing China’s experience with impairment exist in the fields of anthropology, sociology, and disability studies. Matthew Kohrman’s *Bodies of Difference*:

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<sup>5</sup> See Larissa Heinrich, *The Afterlife of Images: Translating the Pathological Body between China and the West* (Durham, NC: Duke University Press, 2008); Bridie J. Andrews, “Changes in the Chinese medical body-image” [Toyo Igaku Shinkyu Jyanaru], *Oriental Medicine: Journal of Acupuncture* 30, no. 1 (2013): 51-62; Howard Chiang, *After Eunuchs: Science, Medicine, and the Transformation of Sex in Modern China* (New York: Columbia University Press, 2018).

Experiences of Disability and Institutional Advocacy in the Making of Modern China ascribes historical agency to China's impaired population. It argues that their struggle for government recognition, members of this community actively impinged on policymaking, forcing the Chinese Communist Party to respond to their demands, and ultimately shaping modern Chinese state-building. Emma Victoria Stone's 1998 dissertation, "Reforming disability in China: a study in disability and development," straddles sociology, development studies, history, area studies, and disability studies in crafting an historical overview of impairment in China.<sup>6</sup> To date, this represents the most comprehensive study of historical impairment in a strictly Chinese context. But Stone's dissertation falls short as a truly historical piece, reading more like a summary than an analysis of textual sources. This is corroborated by the fact that she cites very few primary sources. More than half of Stone's source base consists of secondary publications from Europe, the U.S. and China.

Traditionally historical scholarship on impairment in China is still in its infancy. Fabien Simonis's 2010 Ph.D. dissertation, "Mad Acts, Mad Speech, and Mad People in Late Imperial Chinese Law and Medicine," moreover, looks at how Chinese officials, physicians, and ordinary family members dealt with mad speech, crazy behavior, and the insane from the Song (960 – 1279) to Qing (1644 – 1912) dynasties. This work sheds new light on late imperial Chinese experiences with mental illness, demonstrating how Chinese society understood and engaged with this phenomenon over time.<sup>7</sup> More recently, Emily Baum's *The Invention of Madness: State, Society, and the Insane in Modern China* traces the genealogy of madness from the turn of

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<sup>6</sup> See Emma Victoria Stone, "Reforming disability in China: a study in disability and development" (University of Leeds, 1998), Ph.D. diss.

<sup>7</sup> See Fabien Simonis, "Mad Acts, Mad Speech, and Mad People in Late Imperial China," (Princeton University, 2010), Ph.D. diss.

the twentieth century to the onset of the 1937 war with Japan. Specifically, Baum interrogates the incremental shifts in psychiatric ideas about madness, which, as she observes, coalesced to form the modern concept of “mental illness.” This essay will attempt to do the same for physically impaired bodies in a much more limited space. Tangentially, Eunjung Kim’s 2017 *Curative Violence: Rehabilitating Disability, Gender, and Sexuality in Modern Korea* attempts to critique the relationship between impairment and nationalism in modern Korea. More critically, Kim coins the term “curative violence” to describe the social and material investments in curing disability, emphasizing their violent contexts and consequences. She does so by consulting Korean folktales, novels, visual culture, media accounts, government policies, and social activism.<sup>8</sup> Kim’s work is a potential model for how to assess the development of East Asian nationalist discourses through the lens of impairment.

What follows below, therefore, will be the first historical project to attempt to trace the social, cultural, and political factors that changed Chinese views on impaired bodies between the late Qing dynasty and mid-Republican China (1912 – 1949). It will not employ a cross-disciplinary approach in the exploration of Chinese “disability history.” Rather, it will consult a variety of popular Chinese media publications (newspapers, companion weeklies, and magazines) to follow the life course of the term *feiren*. Ultimately, it will contend that a gradual decrease (after an initial upswing between 1909 and 1930) in the use of *feiren*—and variations thereof in medical journalism and popular media from the mid-1870s to the 1930s—denoted a de-essentialization of impaired bodies in the face of increasing influences from Western biomedicine. To describe impaired bodies as either “essentialized” or “de-essentialized” is to delineate a shift between pre-nineteenth century and post-nineteenth century formulations of the

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<sup>8</sup> See Eunjung Kim, *Curative Violence: Rehabilitating Disability, Gender, and Sexuality in Modern Korea* (Syracuse, NY: Syracuse University Press, 2017).

medicalized body in China. Prior to the influx of medical proselytism from the West, understandings of medicalized bodies in China rested on the theory of “systematic correspondence.” Regarding this epistemology, historian of Chinese medicine, Paul U. Unschuld, writes: “The resulting immanent conceptual incongruity...in the medicine of systematic correspondence may present today’s historian of science with questions that touch on the very validity of the theoretical foundations of this healing system.”<sup>9</sup> The “conceptual incongruity” to which Unschuld refers not only hints at the alterity between Chinese and Western medicine in general, but also bespeaks fundamental differences between the way premodern Chinese medicine conceived of ailments and their healing. This is an epistemology that as readily evokes the effects of magic as those of yin-yang. The latter leans heavily on notions of balance between oppositional, essential cosmological forces.<sup>10</sup> In contrast, the scientization of Chinese medicine during the nineteenth and twentieth centuries gradually marginalized essential formulations of the medicalized body and, as historian Howard Chiang notes, “the modern Chinese nation learned to embrace the universalism of scientific objectivity.”<sup>11</sup> It is precisely through this change in scientific perception, marked by the sidelining of essences, that effectively de-essentialized medicalized and, by extension, impaired bodies.

### Sources

Late Qing newspapers like the Shenbao (申報, The Shanghai Times) and the Da Gongbao (大公報, L’Impartial) represented “independent mouthpieces of the public voice.”<sup>12</sup> Coupled with

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<sup>9</sup> Paul U. Unschuld, *Medicine in China: A History of Ideas* (Berkeley: University of California Press, 2010), 98 – 99.

<sup>10</sup> *Ibid.*, 54 – 58.

<sup>11</sup> Chiang, 124.

<sup>12</sup> Barbara Mittler, *Introduction to A Newspaper for China?: Power, Identity, and Change in Shanghai’s News Media, 1872 – 1924* (Cambridge, MA: Harvard University Asia Center, 2004), 2.

early-Republican magazines such as Hong Zazhi (紅雜誌, The Scarlet Magazine; Hong Meigui, 紅玫瑰, The Red Rose after 1924), a short-lived, Shanghai-based publication (1922 – 1924) that featured opinion pieces about a wide range of social and cultural issues, these new mediaplatforms provided a vibrant discursive space for elite ponderings . Founded in 1872 and 1902 respectively, the Shenbao and the Da Gongbao were two of the most influential newspapers in modern Chinese history. The former, founded by British businessman, Ernest Major (1841 – 1908), and later passed into Chinese stewardship, would run until the establishment of the People’s Republic of China (PRC) in 1949. The latter, founded by Ying Lianzhi (英斂之, 1867 – 1926), a late Qing aristocrat of Manchu descent and Catholic convert, continues operating as a political mouthpiece today.<sup>13</sup> The Scarlet Magazine/The Red Rose Magazine, founded by novelist Yan Duhe (嚴獨鶴, 1889 – 1968) in 1922, ceased operations in 1932.<sup>14</sup> These sources, and others similar to them, will enable the telling of a vibrant tale about how impaired medicalized bodies, through the transformative effects of the interaction between Chinese and Western medicines, transcended their relative conceptual marginality in late imperial China, becoming sites of fierce cultural and political debate.

### **Impairment during the Qing-Republican Transition**

On the 21<sup>st</sup> of June, 1872, the Shenbao reported on an incident where a hired laborer in Shanghai hatched a devious plot against a man named Hong. It reads:

“Never before, within the strictures of the ruling administration, has there ever been an incident of misfortune such as this. It serves as a warning to the administration. In the city, there was a man named Hong who usually works in its administrative offices. As a habit, he always kept a boy servant by his side. By nature, Hong was quick to anger. All of the hired laborers who toiled on behalf of his house, and did not do so to his satisfaction, bore the brunt of relentless chastisement. One morning, Hong roused his boy servant from his slumber, calling for hot water. But, because the boy did not awaken [to do his duty],

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<sup>13</sup> Zheng Liangen (鄭連根), 前事今識：中國近現代的新聞往事 [Understanding the Past Today: The History of News in Modern China] (Taipei: Xiuwei Chubanshe, 2009), 127.

<sup>14</sup> Zheng Yimei (鄭逸梅), 芸編指痕 [Tracing Literature] (Harbin: Beifang Wenyi Chubanshe, 2016), 134.

Hong vented his anger by dousing the boy with said water, ruining their clothes and scalding their face. The boy confided in his family for some time. After a month or so, the boy suddenly said to Hong: ‘I have family who are taking me to Jinshan, and we leave tomorrow. Your house will need to be run by other hired hands’. Hong acquiesced, and lived under the servitude of three boys. The next day, Hong suddenly felt as if his insides were boiling, becoming mute and effectively a *feiren*.<sup>15</sup> This particular account is a classic tale about a master’s power over his servants. At the same time, it resonates with Buddhist ideas of karma (yinguo, 因果) and Confucian sensibilities about hierarchy and, in this case, the shocking and vengeful subversion of it. It would seem that Hong received just punishment for his many mistreatments of his hired servants. Punishment, however, is the key point of analysis here. Hong’s subsequent impairment on account of poison can be read as a function of karma, where a person’s destiny is affected, if not determined by his actions. The use of *feiren* makes sense in this context, as Hong’s bodily suffering is described as a product of his own malice. His loss of speech, moreover, rendered him an asocial being, relegated and marginalized to a shadowy existence. However, this is but one example of how *feiren* operated in the culture at the time.

Only about a decade removed from the Second Opium War (1856 – 1860), a war which saw China again defeated by Britain and subject to a greater influx of opium as a result, discussions of debility also revolved around the consumption of opium. Another article from the same year warned about the dangers of the drug: “One is a *feiren* upon becoming addicted to opium. It breeds calamity! Do you know that, merely two days after succumbing to addiction, you will become a *feiren*”?<sup>16</sup> Due attention must be given to the fact that *feiren* is used twice in

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<sup>15</sup> “傭工毒計” [A Servant’s Poisonous Plot]. 申報 [Shenbao], June 21, 1872, no. 45. Original text: “從來馭下過嚴必至禍生不測今舉一事言之可爲馭下者戒城內洪某素在衙署作長隨善居積遂成殷庶其家僱一傭童爲服役洪某素性悍惡凡有傭於其家者操作稍不如意輒遭叱罵非至千百言不止如是習以爲常一日早起喚童取水面童因水未熟捧進稍遲洪童貪眠晏起盛怒非常水至竟舉盆擲之童衣既沾濡而面亦損傷童以已家貧一時無處可以另圖爲覓食計故惟隱忍之而已迨至月餘童忽請洪曰吾有族人攜我往金山貿易明日旋里束裝汝家需人役使宜即另僱別人洪某勸留再三童竟不從而去翌日洪某猝然五內如沸竟至失音越旬而啞遂成廢人。”

<sup>16</sup> “戒食鴉片文” [An Essay on the Benefits of Quitting Opium]. 申報 [Shenbao], September 26, 1872, no. 128. Original text: “癮成而人廢鴉片之爲禍烈矣夫癮生則時事兩天其與廢人也。”

two consecutive sentences, emphasizing the deleterious effects of opium on the body. The impaired body here is seen as a condition to avoid. While the quitting of opium seems to imply the mutability of potential disease and impairment (suggesting that quitting would improve one's future health), it is the fear of an irreparable, opium-addled body that drives the writing of this piece. The one who ignores its warnings will bear all responsibility for their own afflictions. Similar to the previous story of Hong's poisoning, the impairments brought on by opium use would be punishment for a life lacking good morality. This is impairment as punishment, and the fashioning of a disposable, useless body. A particularly admonishing line towards the end of the piece reads: "All those who partake in opium will live a hard life not unlike death."<sup>17</sup> Its allusion to the immense suffering of impairment is clear. The irreversible debility of such a *feiren* remained firmly situated on the physical body itself. As described in this instance, opium-addled bodies conjure an image of debility quite different from present-day constructions of impairment, suggesting *feiren*'s broader conceptual parameters during this period.

Borrowing from Judith Butler's study of discursive power gender performativity, and bodily materiality, impairment as retribution is construable as the creation of abject bodies.<sup>18</sup> Chapter 7 of her book, *Bodies that Matter: On the Discursive Limits of "Sex,"* titled "Arguing with the Real," not only describes the power of discourse to make certain bodies intelligible through the maintenance of heteronormativity, but also its ability to make unintelligible, through exclusion, bodies that fall outside of its parameters. For Butler, the unknowability of these bodies is what makes them abject.<sup>19</sup> Therefore, in order to understand the relationship between impaired bodies and the concept of abjection is to evoke again the ideas of marginalization and exclusion.

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<sup>17</sup> Ibid. Original text: "嗜鴉片者皆雖生而如死。"

<sup>18</sup> See Judith P. Butler, *Bodies that Matter: On the Discursive Limits of "Sex"* (New York: Routledge, 1993).

<sup>19</sup> Ibid., 188.

It is not clear from Butler's work if abject bodies are explicitly unintelligible, or if her definition of abjection also extends to their marginalized, but intelligible counterparts. If so, then *feiren* is indeed a synonym for abjection. The marginality of impaired bodies, perhaps due to the unsettling reality of their intelligibility, made them objects of simultaneous critique and wonder. Critical voices, like that heard in the story above, often rationalized impairment as the consequence of immorality. The hampered bodies of late imperial Chinese society, however, were not always viewed strictly through a retributive lens.

A rather peculiar story appeared in a Shenbao article dated December 30, 1880. It recounts information, gathered through hearsay, of a woman in Hong Kong, named Li An, who was able to walk without feet. It says the following of this woman:

“A report from Hong Kong tell of a woman who can walk without feet. Peculiar people and stories provide for topics of conversation, spreading news. Please consider its details. It is commonplace in Hong Kong's large orphanages to come across young girls whose families are too poor to raise them, committing them to these institutions for nourishment and instruction. At an older age, [the orphanages] also provide matchmaking services as an act of good will. Today, this orphanage released a roster of its tenants for the thirteenth time. This document records a total of eighty-one women grown and young. Of them, two have been married off this year. Among the two, one has had her feet surgically removed, but ambulates with conviction grace. An investigation into her background reveals her to be twenty-five sui with a surname of Li, and a personal name of An. According to local reports, she possibly hails from Guangzhou. As a child, her parents felt prejudiced towards her condition and abandoned her outside of Boji Hospital. The chief physician noticed this. Upon taking her in and seeing her frostbitten feet, the chief physician deemed it necessary to amputate them in order to save her life. Having amputated [her feet], [the physician] proceeded to give medical treatment. After she recovered, she became a *feiren*.”<sup>20</sup>

The tone of this account, particularly the story of how this Li An came to her predicament, aims as much to incite sympathy as it does amazement. In describing her gait as graceful, and offering a generally positive interpretation of the story, the author adds a further dimension to

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<sup>20</sup> “無足能行” [Able to Walk without Feet]. 申報 [Shenbao], December 30, 1880, no. 2756. Original text: “香港報有無足能行之女奇人奇事可資談助而廣新聞請備述之香港日耳曼育嬰堂遇有貧家幼女不能養育者收入堂中飲食而教誨之長爲之擇配誠善舉也今該堂第十三次報章內開堂中女子大小八十一人本年嫁去者二人此二人中一人雙足均已刖去而珊珊之步較勝尋常查此女姓李名安年二十五歲本由羊城發來蓋此女乃穗垣人幼時父母乘其病危潛棄於博濟醫館門外主醫席者知之收入館見其兩足已經冰死苟非刖去必傷性命遂刖之而爲治病病痊女遂成廢人。”



contemporary voices surrounding impaired bodies. This curious amalgamation of sympathy and curiosity, moreover, not only suggests a lack of familiarity with the plight of the impaired, but also brings gender into the discussion of beleaguered bodies. While the rest of the story tells of Li An's education and hopes for a better future, the softness with which Li An's experiences are recounted contrasts sharply with the judgmental words found in the story of a man named Hong. It cannot be known for certain if the author's clemency towards Li An stemmed from a Confucian requirement of gentlemanliness, or if the latter's womanhood curbed potentially demeaning language. But, the fact that Li An found a suitor and married can simply be understood as a personal triumph over unfortunate circumstances. One is inclined to think that, in this specific instance, Li An is spared from her mean status. But, according to the article, her instances of self-improvement and resilience are still recounted with an air of disbelief. Li An's physical disposition, in other words, continued to overshadow her merits as a social being, her assertion of subjectivity still denied. Stories such as Li An's are not meant to convey karmic punishment for bad deeds and ill behavior. Instead, they concurrently emphasize both the unfairness of life and how some nonetheless flourish amidst the trials and tribulations.

Furthermore, the propagation of *feiren* as an essentializing label for impaired bodies in the late Qing would be incomplete without a discussion of Chinese bodies, specifically those under the Western medical gaze. Medical missionaries from Europe and the United States introduced Western biomedicine to China in the nineteenth century, sparking a heated moral debate about Chinese medical bodies. What constituted a *feiren* in the Chinese medical mind became perhaps even more multifaceted. The very concept of *feiren* transformed into a point of contention between Chinese and Western medicine, as well as debates about cultural

backwardness and modernity. Articles from formative issues of *Shenbao* aptly reflected this state of affairs, tracing the birth of the medicalized body in late Qing and early Republican China.

As early as 1872, editorials praising the efficacy and wondrousness of alternative medicines (those not categorized under traditional Chinese medicine) filled issues of the *Shenbao*. Archetypal references to *feiren* naturally accompanied many of these tracts. On May 23<sup>rd</sup> of that year, a simply entitled piece, “On Medicine,” celebrated the curative potentials of Western and Mongolian systems of medicine. It elaborated as follows:

“There was a speeding carriage that went astray, colliding with a child of about one sui, crushing his femur under its wheel, throwing him forward about ten paces, and rendering him unconscious. Bystanders helped the child’s family members twist him [out of his predicament]. The driver immediately offered compensation, for with the driver was one Mongolian physician who came up to the child to first tend to the bleeding of their leg in general, and then to the bleeding resulting from it being broken. This physician first prepared the medicine...then used a bamboo stalk to immobilize the leg. [The Mongolian physician] then repeatedly adjusted his medicine, which he concocted with wine, finally pouring it into the child’s mouth. After some time, the child awoke, and was carried back to his family. Arriving again [at the scene of the accident] ten or so days later, the boy was playing and jumping around at the market grounds. If the benevolence of Western medicine is combined with the skill of Mongolian physicians, then there will be no more *feiren* in this world. Would this not be good and beautiful”?<sup>21</sup>

As with the previous passages, it is obvious to the reader that, even in context of alternative healing methods, *feiren* as an ontology still stood for something to be avoided. Unlike the earlier articles, the presence and perceived superiority of Mongolian and Western medicine arouses a sense of hope for those living in debility. This is one of the first examples in *Shenbao* where even the slightest suggestion of a de-essentialized impairment is present. More specifically, this early touting of non-Chinese medicine suggests an implicit tension between Chinese and non-Chinese medical practices. This narrative, and others like it, therefore, ignited comparative

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<sup>21</sup> “醫論” [On Medicine]. 申報 [*Shenbao*], May 23, 1872, no. 20. Original text: “有跑熱車者誤撞一數歲小兒于地輪折其股一骸飛至數十步外而小兒已昏迷不省人事其家人扭住車夫責令抵償旁有一蒙古醫士延之來子見其將小兒骸血及斷骸之血兩處洗淨糝以藥...再外則夾以竹木復以酒調藥末灌入小兒之口時許而小兒甦昇歸其家遲十餘日子再過其地而小兒已在市中跳躍以西醫之良若再加以蒙古醫士之術則天下無廢人豈不盡善盡美哉!”

discussions of medicalized bodies beyond Chinese conventions of preventative medicine and healing. Impairment by way of injury and disease, if acted upon by the seemingly inexplicable efficacy of these medical systems, could be eradicated fully from the body (and identity) of the affected. It must be considered, nevertheless, that the earlier examples of retributive impairment are contemporaneous with this piece, hinting at a burgeoning, yet complex discourse on medical modernity in nineteenth-century China. Qing China of the 1870s stood on the precipice of medical scientification. But the apparent lack of objective knowledge about Western biomedicine, coupled with the use of *feiren*, implies that impaired bodies, or at least ideas about them, and emotional responses to them, remained firmly essentialized. *Feiren*, so it seemed, stood as a byword for backwardness, ineptitude, and ignorance.

Towards the end of the nineteenth century, the co-existence of Chinese and Western medicine in China inspired a handful of newspaper contributors to give comparative assessments of each school. An editorial in the July 31, 1887 issue of *Shenbao* commented quite heavily on the immorality (and inferiority) of Western medicine. A particularly incendiary line in the piece reads:

“The methods with which Western doctors treat wounds are far inferior to those advocated by well-regarded Chinese physicians. Western physicians prefer cutting and sawing, [methods] that allow the spread of poisonous qi. This is, for its part, [an indicator of] their lack of skill. Although [the patient] will eventually heal, they will ultimately become a *feiren*.”<sup>22</sup>

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<sup>22</sup> “論中西醫學之異” [An Essay on the Differences between Chinese and Western Medicine], 申報 [Shenbao], July 31, 1887, no. 5132. Original text: “西人之治傷科遠不如中國之專門名家西人專用剖鋸斷截謂毒氣不致延染是其術亦窮矣將來雖愈終成一廢人耳;” For a similar, but less scathing view of Western medicine, see “論說” [Explanations]. 大公報 [Da Gongbao], January 12, 1903, no. 209. See also “論中西醫學之所以不同” [On The Reasons Why Chinese and Western Medicine are Different]. 申報 [Shenbao], November 20, 1886, no. 4886; “答客問中西醫學之異同” [Answering Readers’ Questions Regarding the Differences and Similarities between Chinese and Western Medicine]. 申報 [Shenbao], October 13, 1895, no. 8076; “中西醫學芻言” [A Few Modest Words on Chinese and Western Medicine]. 申報 [Shenbao], September 28, 1903, no. 10935.

Here, the impaired body is clearly interpreted in context of late-nineteenth-century Sino-Western relations. The first node is that of the methodological and moral tensions between Chinese and Western medicine, while the second is colored by the social and political unrest plaguing China in the wake of Western imperialism. In the author's critique of Western surgical methods, there are marked undertones of distrust and enmity. They seem to assert the superiority of Chinese methods as much on the basis of national pride, traditional knowledge, and a rebuking of China's "semi-colonial" experience as a true evaluation of its efficacy or inefficacy. More critically, submission to the dangers of Western surgical methods is said to make a *feiren* of the patient. *Feiren*, in this way, takes on multiple on multiple connotations and meanings.

Moving into the twilight years of Qing China (specifically 1909 – 1912), the contexts in which *feiren* appeared in newspaper articles (including, but not limited to Shenbao) and magazines became increasingly biomedical.<sup>23</sup> Moral deployments of *feiren* continued to appear in popular media for women, particularly in discussions of women's work and domestic education.<sup>24</sup> In 1909 alone, it appeared fifty-eight times.<sup>25</sup> The following year, in 1910, instances of *feiren* amounted to fifty.<sup>26</sup> The year 1912 recorded sixty-two. While not extremely high, these

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<sup>23</sup> See “醫聾為聰” [To Heal the Deaf so that They Hear Again]. 申報 [Shenbao], September 30, 1909, no. 13167; “轉聾為聰” [Turning Deafness into Hearing]. 申報 [Shenbao], September 25, 1909, no. 13162; “轉聾為聰” [Turning Deafness into Hearing]. 申報 [Shenbao], October 2, 1909, no. 13169; “轉聾為聰” [Turning Deafness into Hearing]. 申報 [Shenbao], October 6, 1909, no. 13173. All of these discuss medical treatments for deafness, healing *feiren*.

<sup>24</sup> See, for example, Zhao Yuan (趙媛), “家庭教育論” [On Domestic Education]. 婦女時報 [Funü Shibao], June 11, 1911, no. 1; “廣東鎮坪縣女子職業譚” [A Thorough Discussion of Women's Professions in Zhenping District, Guangzhou]. 婦女時報 [Funü Shibao], September 25, 1912, no. 8. These deployed *feiren* to describe the non-working women of imperial China.

<sup>25</sup> See “近代報刊” [Modern Newspapers and Journals], <https://www.neohytung.com/Main.aspx>, accessed February 11, 2018. Use search query “廢人.”

<sup>26</sup> Ibid.

numbers represent sharp increases in frequency when compared to the period between 1872 and 1908. China at the turn of the twentieth century experienced the gradual, yet impactful assimilation of germ theory.<sup>27</sup> This intensifying exchange of medical knowledge between China and the West, over the course of more than fifty years, produced a tangential effect that interweaved impaired bodies ever more intimately with broader nationalist discourses. Ruminations on the treatment of disease, as demonstrated above, occurred within a medical culture which, according to Bridie Andrews, “premodern ideas about the cause, transmission, and appropriate treatment for apparently similar [vis-à-vis the West] diseases are all too easily dismissed as ‘folklore’.”<sup>28</sup> The geopolitical implications of such an assumption compelled late Qing and early Republican elites to participate full-force in the scientification of Chinese medicine. Undoubtedly, the ramifications of this shift greatly changed the meanings and connotations associated with the idea of *feiren*. Though it should be noted that the term maintained a high usage rate during the early Republican era, as journalists and contributors used traditional terminology to explain new concepts.

### **Early Republican China, A Watershed Moment**

With the collapse of the Manchu-led Qing dynasty, and the establishment of a Republican government, China embarked on a passionate endeavor to finally rid itself of its unsavory reputation as “The Sick Man of Asia” (東亞病夫, *dongya bingfu*). This sentiment is naturally reflected in the popular media of the day. These sources suggest a co-evolutionary relationship between Chinese understanding of impaired bodies and the corporeal state. And, from the end of

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<sup>27</sup> See Bridie J. Andrews, “Tuberculosis and the Assimilation of Germ Theory in China, 1895 – 1937,” *Journal of the History of Medicine* 52, no.1 (Jan., 1997).

<sup>28</sup> Andrews, 120.

the Qing to the eve of the Japanese invasion of Manchuria (1931 – 1932), *feiren* appeared with more regularity than at any other moment since the 1870s. A viable explanation for this spike in number is the occurrence of significant events in the history of Chinese medicine like The Chinese Medical Revolution (中國醫學革命, *zhongguo yixue geming*) of spring 1929 and The March Seventeenth Demonstration of the same year.<sup>29</sup> These events represent the first instances of institutional confrontation between state-supported practices of Western biomedicine and practitioners of Chinese medicine. One of the leading figures of The Chinese Medical revolution was Yu Yan (餘巖, 1879 – 1954) who, along with other Chinese practitioners of Western biomedicine, submitted a proposal entitled “Abolishing the Old Medicine to Sweep Away the Obstacles to Medicine and Public Health” to the Central Board of Health.<sup>30</sup> In this proposal, Yu Yan and his colleagues laid out four critiques of Chinese medicine: its reliance on knowledge that is not corroborated by (“scientific”) truth, its use of pulse taking as its main method of diagnosis, its inability to improve the Chinese race through eugenics, and its trust in “faith healing.”<sup>31</sup> Opponents of Chinese medicine, therefore, utilized a discursive platform where premodern medicine constituted a useless jumble of quackery. The following discussion will attempt to tabulate, however concisely, the conceptual instabilities and variations in meaning of *feiren* under these contentious conditions. Not only will it give greater context to why iterations

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<sup>29</sup> Sean Hsiang-lin Lei, *Neither Donkey nor Horse: Medicine in the Struggle over China's Modernity* (Chicago: University of Chicago Press, 2014), 101 – 109.

<sup>30</sup> Yu Yan (餘巖), 廢止舊醫以掃除醫事衛生之障礙案 [Abolishing Old Medicine to Sweep Away the Obstacles to Medicine and Public Health], 醫界春秋 [Annals of the Medical Profession], no. 34 (1929): 9 – 10.

<sup>31</sup> K. Chi-min Wong and Lien-teh Wu, *The History of Chinese Medicine* (Tientsin: The Tientsin Press, 1932), 161 – 165.

of *feiren* were so common in popular media, but also explore how this was a function of the long-simmering tensions between Chinese medicine and Western biomedicine.

Classified advertisements in early-twentieth-century China implied both a modern consumer economy and a new manner of public communication.<sup>32</sup> The influx of medicines from the West and Japan inspired many Chinese pharmacists (used loosely to refer to Chinese makers of medicine) to concoct “new medicines” (新藥, *xinyao*). These new medicines, regarding their manufacture at the proverbial crossroads of China and the West, represented a melding of Chinese and Western medical traditions. In terms of pure ontology, they were incarnations of the tensions between Chinese medicine and Western biomedicine. An ad from November 24, 1914, for example, reads:

“The fact that humans possess two eyes is just as obvious as heaven having both a sun and moon. Until recently, if one suffered from a disease of the eyes, there was no way of inspecting the problem, and no way of understanding [the condition] from a distance. Left untreated for too long, one would descend into life as a *feiren*! This pharmacy, for decades, has fashioned Guangming Eyedrops [光明眼藥, *guangming yanyao*], which is able to heal seventy-two diseases of the eye...The ancients knew nothing of this precious secret.”<sup>33</sup>

Read at surface level, it is clear that this particular pharmacy is using the mystique of Western biomedicine to entice potential customers. Read another way, the argument that China’s

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<sup>32</sup> See, Max K.W. Huang, “Medical Advertisements and Cultural Translation: The Case of Shenbao in the Early Twentieth Century,” in *Print, Profit, and Perception: Ideas, Information and Knowledge in Chinese Societies, 1895 – 1949*, Pei-yin Lin and Weipin Tsai, eds. (Boston: Brill, 2014), 114 – 147.

<sup>33</sup> Advertisement, “眼疾無憂醫目重明寄方” [Worry Not about Diseases of the Eye: A Prime Way to Restore Your Eyes to Clarity]. 申報 [Shenbao], November 24, 1914, no. 15013. Original text: “人之有雙目猶天之有日月也眼目有病則近不能察鑒遠不能瞻眺久而不治勢將淹為廢人矣本藥房竭數拾年心血始得此靈效奇方名曰光明眼藥能統治眼部七十二症無論遠年不愈瞳人生翳白星白珠紅眼爛皮或痛如刀割或癢不可忍以及痘後目疾只須將此藥日點三次雖瞽目亦能豁然開朗真千古不傳之秘寶也。” Also see Advertisement, “眼疾無憂醫目重明寄方” [Worry Not about Diseases of the Eye: A Prime Way to Restore Your Eyes to Clarity]. 申報 [Shenbao], November 26, 1914, no. 15015; Advertisement, “眼疾無憂醫目重明寄方” [Worry Not about Diseases of the Eye: A Prime Way to Restore Your Eyes to Clarity]. 申報 [Shenbao], December 2, 1914, no. 15021; Advertisement, “眼疾無憂醫目重明寄方” [Worry Not about Diseases of the Eye: A Prime Way to Restore Your Eyes to Clarity]. 申報 [Shenbao], December 4, 1914, no. 15023; and various other issues between 1912 – 1915. Recurring ad.

encounter with Western biomedicine in this period actually helped improve Chinese medicine, put forth by Sean Lei and Bridie Andrews, is also evident. More pressing, however, are the implications that *feiren* is now not just an avoidable state of being, but also a curable, mutable condition. This is evidenced by the phrase: “Regardless of age.”<sup>34</sup> Even the ravages of old age, transhistorically understood as the most common agents of debility, could be ameliorated with hybrid new medicines. These were, in other words, the incipient stages where *feiren* began to shift from immutable essentialized concept to mutable medical body. Later sections of this paper, as it moves towards the 1930s and beyond, will demonstrate how ideas of the healable impaired body framed mid-Republican discussions of the body as machine (yet another borrowing from Western medicine). But, for now, this example of the changes wrought upon concepts of debility by a Sino-Western medical fusion will be enough for further discussion.

By the late 1920s, while the impaired medical body continued to experience shifts in its material intelligibility, the essentializing concept of *feiren*, in part, lived on in literary fiction consumed en masse by large readerships.<sup>35</sup> A monthly publication entitled The Sun Monthly (太陽月刊, taiyang yuekan) published a fictional story (entitled “*Feiren*”) in 1928 about a young man (Sha Xiujia, 沙修嘉) who was arrested not as an adult, but as “someone not yet of age” (未成年者, wei chengnianzhe).<sup>36</sup> Brought before his jail cell, he clamored: “I refuse to go prison! I am not yet of age! I refuse to go...I am a *feiren*!”<sup>37</sup> Sha’s fear and desperation induced him to associate immaturity, minority, and youth with *feiren*. Conclusions drawn from these connections

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<sup>34</sup> Ibid., Original text: “無論年.”

<sup>35</sup> See Yan Fusun (嚴芙孫), “夢裏” [In a Dream], 快活 [Live Fast], 34 (1922): 19; 海上漱石生 (pseudonym: “A Life Rinsing Stones in the Sea”), “五百萬” [Five Million], 紅雜誌 [Scarlet Magazine] 1, no. 1 (1922): 31; Zhao Chiyu (趙赤羽), 毒醫 [Evil Doctor], 快活 [Live Fast], 18 (1922), et al.

<sup>36</sup> “廢人” [Feiren]. 太陽月刊 [The Sun Monthly], January 1, 1928, no. 6.

<sup>37</sup> Ibid. Original text: “我不願意入獄哩！我是未成年的！.....我不願意進去！”



illuminate, at least in certain aspects of the early-Republican literary world, the place of debility as a metaphor for dissent and insubordination, something essential to the comportment of deviant individuals. At the same time, *feiren* is seemingly afforded a degree of social agency and, in Sha's case, a potential escape from punishment. Conflicting with earlier ideas of the impaired body, Sha's willingness to identify as a *feiren* attests to the fluidity with which they could be understood in this period. Debility, on one hand, remained an experience cloaked in negative moral stigma and social marginalization. On the other, it became a discursive tool, a bargaining chip that held the potential to alter life courses. Impaired bodies, in this way, became reference points for virtue and dishonesty, spite and sympathy—a complex moral milieu that, at different times, challenged and bolstered able-bodied hegemony.<sup>38</sup>

From these stories, one is presented with snapshots of impaired bodies and the conditions surrounding their perceived debility. The tale of Hong's poisoning and his subsequent muteness is one saturated with retribution, a belief in impairment as consequence of bad behavior and moral corruption. The warning about the dangers of opium, however, is also a reflection of China's changing social landscape in the late-nineteenth century. Opium was a British import that functioned as a tool of empire. The countless cases of ruined lives and crippled bodies have been the subjects of many social histories.<sup>39</sup> Yet, as is shown in the two examples above, impairment in late Qing China bore the markings of traditional moral and religious discourses. But concepts of them were also inflected with the cultural and political upheavals of a China in transition. With the establishment of the Republic of China, the sources begin reflecting China's

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<sup>38</sup> For gendered commentary on impaired bodies vis-à-vis able bodies, see Ji Qun (濟群), “看了女兒英雄影片後的瑣話” [Some Trivial Words after Watching Heroic Daughter]. 紅雜誌 [Scarlet Magazine] 12, no. 1 (Nov., 1922). No page number given.

<sup>39</sup> See Zheng Yangwen, *The Social Life of Opium in China* (New York: Cambridge University Press, 2005).

drive to leave its state debility in the past. And yet, the cultural shift away from an essentialized concept of *feiren* proved to be a gradual process, where premodern language intermixed with modern ideas derived from Western biomedicine. Chinese popular literature of this period also reflected this tension between old and new, as impairment took on new meanings, colored by the cultural, political and, in this case, scientific upheavals of the early-twentieth century. Moving into the 1930s, the effects of the Chinese Medical Revolution of 1929 will become very apparent, as China began a full-scale enculturation of Western biomedicine, giving rise to a much more institutionalized expression of “new medicine.” Another consequence of Yu Yan’s push for Chinese medical modernity is a comparative decrease in the appearance of *feiren* in popular media after 1930. While the term never truly disappeared, the contexts in which it was used became almost purely medical, and within the purview of public health. What follows will be an examination of *feiren* (its survival and replacement with other, less essentializing terms) in The Shenbao Medical Weekly (申報醫藥週刊, shenbao yiyao zhoukan) and other media.

### **Diminishing *Feiren* in Mid-Republican Medical Journalism**

What cannot be ignored is Imperial Japan’s role in disseminating Western biomedicine in China. According Ruth Rogaski, the Japanese term *eisei* (衛生) drove the modernization of Chinese public health at the turn of the twentieth century. It became indifferentiable from notions of “hygienic modernity.”<sup>40</sup> The apparent fading of *feiren* from the Chinese medical lexicon engendered an opposite effect. Instead of fixing a single concept to a likewise singular term, *feiren*’s decrease in frequency widened the conceptual parameters of what impaired bodies were or could be. Debility slowly edged away from conventions of intrinsic marginality and towards

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<sup>40</sup> Ruth Rogaski, *Hygienic Modernity: Meanings of Health and Disease in Treaty-Port China* (Berkeley: University of California Press, 2004), 225 – 253; Nicole Elizabeth Barnes, *Intimate Communities: Wartime Healthcare and the Birth of Modern China, 1937–1945* (Berkeley: University of California Press, 2018), 195.

greater social and, by extension, historical agency. When The Shenbao Medical Weekly debuted on December 19, 1932, the instances where its contributors opted to use any terms containing the character *fei* witnessed a drastic decrease.<sup>41</sup> *Canfei*, for example, only appeared twice in two entries from 1934. One explained how to dispose of biological refuse (殘廢物, *canfei wu*) from the ears, nose, throat, and eyes, while the other talked about how to remove dust and dirt from one's eyes in order to "avoid the danger of becoming *canfei*."<sup>42</sup> While *feiren* and *canfei* appeared with comparatively higher regularity in Shenbao's main publication, most likely due to the civil wars symptomatic of political factionalism, *feiren* is nowhere to be found in the newspaper's medical weeklies from 1932 to 1937. Absent from the weekly, *feiren* is replaced by such terms as *bingzhe* (病者, "the sick/sickly) and variations thereof.<sup>43</sup>

A December 26, 1932 issue, for example, openly discussed how a physician may wish to understand a patient's psycho-emotional well-being. In so doing, "those who aptly analyze a patient's psychology are benevolent (and effective) physicians."<sup>44</sup> Like the inaugural issue, the second edition of the weekly related foundational medical praxis. More importantly, it did so not

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<sup>41</sup> See 申報醫藥週刊 [The Shenbao Medical Weekly], December 19, 1932, no. 21446.

<sup>42</sup> Tang Renjin (唐仁縉), "耳鼻喉眼衛生常識" [Common Knowledge regarding the Care of Ears, Nose, Throat, and Eyes]. Shenbao Medical Weekly [申報醫藥週刊], August 13, 1934, no. 22025; Wu Zhili (吳之理), trans., "怎麼除去飛到眼睛內的灰沙" [How to Remove Dust that has Flown into Your Eyes]. Shenbao Medical Weekly [申報醫藥週刊], September 10, 1934, no. 22053. See also Chen Baoqin (陳保勤), "[有婦之夫與人通姦]之醫學觀" [Medical Sensibilities for Husbands who Engage in Illicit Sexual Relations]. Shenbao Medical Weekly [申報醫藥週刊], December 3, 1934, no. 22236. This piece presents the term *tanfei* (癰廢), which means "debility on account of stroke."

<sup>43</sup> For *bingzhe* specifically, see Song Guobin (宋國賓), "病者之心理學" [Psychology of the Ill]. Shenbao Medical Weekly [申報醫藥週刊], December 26, 1932, 21453; Yu Gong (愚公), "治療說" [On Medical Treatment]. Shenbao Medical Weekly [申報醫藥週刊], December 26, 1932, no. 21446; Li Xing (李興), "頭痛治療法" [Treatment for Headaches]. Shenbao Medical Weekly [申報醫藥週刊], September 10, 1934, no. 22053; and 74 other instances between 1932 and 1935.

<sup>44</sup> Song Guobin (宋國賓), "病者之心理學" [Psychology of the Ill]. Shenbao Medical Weekly [申報醫藥週刊], December 26, 1932, no. 21453.

only with an emphasis on disease, medicine, and the body, but also by making a clear connection between patient experience and physical illness. This association is further strengthened when the author, Song Guobin (宋國賓), identifies three specific determinants of a given patient's psychological response to disease: age (nianling, 年齡), sex (xingbie, 性別), and natural disposition (xingqing, 性情).<sup>45</sup> Of the three, the sex and age of the patient serve as the biological links between body and mind, disease and suffering. Moreover, the intricacy with which the relationships between a patient's material body, their psychology, and the presiding physician is described denotes a further conceptual evolution of impaired bodies. No longer was an impaired individual considered a *feiren*, but merely a *bingzhe*. The latter term indicates one who suffers from treatable maladies, conditions that did not necessarily render them "garbage." Treatability and the potential for cure is a key here, as *fei* (廢, "garbage") loses its cache as a label for debility. The impaired body, at least in this example, retained its humanity and subjectivity.

Hu Jiayan (胡嘉言), a Chinese physician of Western-influenced biomedicine, continues Song's discussion of the psychology of the ill in the very next issue. Hu reminds readers that the sick seek out physicians solely to find a cure for their ailments.<sup>46</sup> On account of this, he explains that it is the latter's duty to "attend to patients with the utmost skill."<sup>47</sup> A portion of this article posits scenarios involving uncooperative patients, and how a physician must "ignore them and

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<sup>45</sup> Ibid.

<sup>46</sup> Hu Jiayan (胡嘉言), "病家心理之我見" [Reflections on the Psychology of the Ill]. Shenbao Medical Weekly [申報醫藥週刊], January 1, 1933; Yu Yunxiu (余雲岫), "提倡病理解剖知識之普及" [Promoting the Popularity of Expanding Knowledge about Disease]. Shenbao Medical Weekly [申報醫藥週刊], December 19, 1932, no. 21446; Long Jingzhou (龐京周), "上海市近十年來醫藥鳥瞰" [Overview of Medicine in Shanghai during the Decade]. Shenbao Medical Weekly [申報醫藥週刊], December 26, 1932, no. 21453; Zhu Yangao (朱仰高), "肺癆病的三種「起病式」" [Three Types of Pulmonary Disease (A Model)]. Shenbao Medical Weekly [申報醫藥週刊], January 15, 1934, no. 21823; and 91 other instances between 1932 and 1934.

<sup>47</sup> Ibid.

proceed with proper protocol.”<sup>48</sup> Hu provides examples of diseases (such as phlegmon, or acute inflammation) and their treatments. At its very core, this article introduces fear and uncertainty as emotive factors that exacerbate both a patient’s uncooperativeness and the impact of disease on their body.<sup>49</sup> The physician’s role remained that of a caretaker, restoring the (broken) body (through biomedicine) to good health. From another perspective, this is yet another instance where medical encounters with debility cast impairment as mutable, treatable and, ideally curable condition. The implicit prescriptiveness of the text presents impairment with a hint of essentialism, as the narrative employs an instructional approach. But Hu’s use of *bingjia* (病家) instead of *canfei* or *feiren* suggests a view of an impaired body that is diseased, but not discarded or socially marginalized. Its emphasis on the well-being of the patient, while echoing the moral responsibility of premodern practitioners of Chinese medicine as well, implies *feiren* to be a misnomer for impairment by the 1930s. A medical body is not seen as “garbage,” if treatable with biomedicine. Even if biomedicine fails to cure the body, *bingjia* (and *bingzhe*) are still not considered refuse. Rather, a patient’s debility is understood as the consequence of a synthesis between a physician’s willingness and ability and a patient’s response to their efforts—impairment as a social phenomenon and not suffered in marginal isolation.

Just as the use of *feiren* decreased dramatically in the medical journalism of the 1930s, but continued to appear in other contexts, it should not be assumed that *bingzhe* and *bingjia* came

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<sup>48</sup> Ibid.

<sup>49</sup> A line referring to some patients’ aversion to surgical methods for treating phlegmon: “但不幸大多數病家不歡迎。他們情願永久繼續用濕【荃】法子。就是明知道無效也完全在這方想竭力再尋換湯不換藥的辦法來試一試看。到了他覺悟願意切開差不多已全身傳染成發生其他合併症。”[But, unfortunately, the majority of patients do not welcome (such methods). They willingly continue to prefer herbal soup remedies. Even if they know for a fact that such remedies are useless, these patients will proceed accordingly, tirelessly searching for a variety to try. By the time they realize their willingness for surgery, the disease will have already spread to the entire body, resulting in other compounded ailments].

into vogue only as a consequence of *feiren*'s medical demise. The earliest appearance of the term in a popular publication (according to the Jindai Baokan database) is found in Collections of the Sayings of Dr. Wu (Qianlong-Era Woodblock Print Edition from the Enlightenment Studio of a Mister Tang) [吳醫彙講 - 清乾隆唐氏問心草堂刻本, wuyi huijiang – qing qianlong tangshi wenxin caotang keben] from 1794. The compiler, Sun Qingzeng (孫慶增, fl. 18<sup>th</sup> century), used *bingzhe* twice in a discussion of bodily imbalances of qi (氣, “life force”), whereby a person becomes ill.<sup>50</sup> After 1912, usage of the term in medical and related texts occurred thousands of times, peaking in 1928 (1,592 instances) and declining after 1936.<sup>51</sup> *Bingjia* usage developed along a similar trajectory, with its first mention in popular texts coming in 1792, then also declining on the eve of the Second Sino-Japanese War (1937 – 1945).<sup>52</sup> Not only does this attest the historicity of these concepts, but also their longevity as descriptors of debility. Prior to the end of Imperial China, they shared discursive spaces with *feiren*, acting as less abrasive references. Their survival past the popular usage of *feiren* in mid-Republican medical journalism is indicative of a Foucauldian change in “epistemic knowledge.”<sup>53</sup> It is this rise of new knowledge structures that explains their prevalence (and *feiren*'s relative sparsity) in descriptions of debility from this period.

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<sup>50</sup> Sun Qingzeng (孫慶增), 吳醫彙講 - 清乾隆唐氏問心草堂刻本 [Collections of the Sayings of Dr. Wu (Qianlong-Era Woodblock Print Edition from the Enlightenment Studio of a Mister Tang)], in 石芝醫說 [Medical Matters], 1794. Original text: “水不升爲病者，調腎之陽，陽氣足，水氣隨之而升。火不降爲病者，滋心之陰，陰氣足，火氣隨之而降。則知水本陽，火本陰，坎中陽能引升，離中陰能降故也。”

<sup>51</sup> See “近代報刊” [Modern Newspapers and Journals], <https://www.neohytung.com/Main.aspx>, accessed February, 2018. Use search query “病者.” The decline after 1936 likely due to the Second Sino-Japanese War.

<sup>52</sup> Ibid. Use search query “病家.”

<sup>53</sup> Michel Foucault, *The Birth of the Clinic: An Archeology of Medical Perception*, A.M. Sheridan, trans. (New York: Routledge, 1989), 351.

Further proof of the de-essentialization of impaired bodies is Jiang Junsun's (江俊孫) three-part article (spanning three separate issues from April 24, 1933 to May 8<sup>th</sup>, 1933), which gives general advice on how to maintain good health. The first part provides some glaring mortality rates, showing how the number of deaths per thousand proved much higher in China than in the West.<sup>54</sup> Jiang then stresses the economic costs and benefits of healthy, productive bodies.<sup>55</sup> Part two warned of the dangers of contagious diseases and their prevention.<sup>56</sup> But, Jiang's third and final offering of this series is perhaps the most informative. He compares the maintenance of the human body to that of a car part, and does so in meticulous detail. "Like a car part," he says, "[the human body] must also be subject to regular inspection, checking for small, easily fixable problems."<sup>57</sup> "Yet," he warns, "this also means that larger problems will also occur. This applies to the human body as well."<sup>58</sup> Jiang's comparison is much more than a set of similes and metaphors. It attests to the fact that historical Chinese views of the body, based on the interplay of functional systems, were giving way to more structural models by the 1930s.<sup>59</sup> The implications of this shift proved fundamental to the formation of modern sensibilities about impairment in modern China. Structural physiology provided yet another way of understanding debility. Specifically, according to a structuralist perspective, impairment is simply the manifestation of broken parts left unattended (e.g. limbs, organ, etc.). The idea of preventing

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<sup>54</sup> Jiang Junsun (江俊孫), "怎樣維持身體的健康 (上)" [How to Maintain Good Health, Part 1]. Shenbao Medical Weekly [申報醫藥週刊], April 24, 1933, no. 21563.

<sup>55</sup> Ibid.

<sup>56</sup> Jiang Junsun (江俊孫), "怎樣維持身體的健康 (中)" [How to Maintain Good Health, Part 2]. Shenbao Medical Weekly [申報醫藥週刊], May 1, 1933, no. 21570.

<sup>57</sup> Jiang Junsun (江俊孫), "怎樣維持身體的健康 (下)" [How to Maintain Good Health, Part 3]. Shenbao Medical Weekly [申報醫藥週刊], May 8, 1933, no. 21576.

<sup>58</sup> Ibid.

<sup>59</sup> Lois N. Magner, *A History of Medicine* (New York: Marcel Dekker, Inc., 1992), 50.

more serious ailments (大毛病, da maobing) by tending vigilantly to smaller ones (小毛病, xiao maobing), moreover, is a medical sensibility shared by practitioners of Western biomedicine and Chinese medicine alike.<sup>60</sup> Jiang's mechanical symbolism (with its implications of preventable, mutable diseased bodies) further attests to the idea of a sickly, but in no way disposable impaired body. Impairment, in this example, is just the avoidable contingency of subpar self-care.

### Impairment and Women

Intertwined in this story of *feiren*'s disappearance from medical journalism, and the staying power of such terms as *bingzhe* and *bingjia*, is the all-too-often ignored narrative of women's experiences. In Da Gongbao, discussions of female debility, and their categorization as *bingzhe* and *bingjia* date back as early as 1903, where an advertisement for electrotherapy mentions the role of woman doctors who "tend to sickly ladies" (理婦女病者, li funü *bingzhe*).<sup>61</sup> Then, in 1931, Shenbao published a special women's health edition of their paper. This particular edition touches on many health-related aspects of women's domesticity, such as giving birth and vaginal atrophy (陰痿症, yinwei zheng).<sup>62</sup> Towards the end of a rather long advertisement from a local , the recommended treatments for the various feminine ailments listed previously are said to cost only one yuan, "especially if joined by a female *bingzhe*."<sup>63</sup> Lastly, a brief article about the connections between women's mental health during pregnancy and their families appears in an October 30, 1936 issue of Shenbao. It advocates for the use of "Bu Nü

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<sup>60</sup> Jiang Junsun (江俊孫), "怎樣維持身體的健康 (下)" [How to Maintain Good Health, Part 3].

<sup>61</sup> Doctor of Electrical Science, Li Cha [李察電學博士], Advertisement, 大公報 [Da Gongbao], March 12, 1903, no. 258; Doctor of Electrical Science, Li Cha [李察電學博士], Advertisement, 大公報 [Da Gongbao], March 14, 1903, no. 260; Doctor of Electrical Science, Li Cha [李察電學博士], Advertisement, 大公報 [Da Gongbao], March 21, 1903, no. 267.

<sup>62</sup> Advertisement, 申報：黃金十年 [Shenbao: The Golden Decade], 申報 [Shenbao], January 26, 1931, no. 20765.

<sup>63</sup> Ibid.



Rong” (補女容, the advertised medication) to “increase toleration for [the trials of] pregnancy” (受孕力增加, shouyun li zengjia) and “[treat] the mental weakness related to such issues” (與此病有關係之神經衰弱, yu cibing you guanxi zhi shenjing shuairuo).<sup>64</sup> All three of these examples imply the domestic gender segregation of premodern times, as well as a reinforcement of traditional gender roles (i.e. the linear association of women’s mental health and pregnancy).<sup>65</sup> But, critically, the womanly bodies in question are identified as *bingzhe*, suggesting not only the mutability of their conditions, but also an understanding of female debility on par with that of males.

Given the fact that the authors of the articles and advertisements were all presumably male, it can be understood that the female medical body of the late Qing and Republican eras manifested under males’ objectifying scrutiny. But if a medical body’s social context determines how it is perceived and written about, then what qualitative difference is there between male and female *bingzhe*? Are the impaired bodies of men somehow different from those of women? In a 1917 issue of The Ladies’ Journal [婦女雜誌, funü zazhi], an article entitled “The Symptoms of those Who Suffer from Anemia and How to Treat Them” [血虧病者之狀態及其治療法, xiekui *bingzhe* zhi zhuangtai ji qi zhiliao fa] points to a difference between male and female debility. It observes that “anemia occurs more often in women than in men” (婦女之患血虧者較多於男子, funü zhi huan xiekui zhe jiao duoyu nanzi).<sup>66</sup> The author, Zong Liang (宗良), then proceeds to explain

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<sup>64</sup> Wu Zhonglin (武鍾麟), “康健之路 (康健醫藥社主編) : 婦女神經衰弱與家庭” [The Path to Health (Edited by the Health and Medicine Society): The Weakening of Ladies’ Mental Health and the Family]. 申報 : 黃金十年 [Shenbao: The Golden Decade], 申報 [Shenbao], October 30, 1936, no. 22809.

<sup>65</sup> An outcry against women’s restriction to the home and tuberculosis appears in a caption of a photo in 玲瓏圖畫雜誌 [Elegance Pictorial Magazine] 1, no. 23 (1931): 86.

<sup>66</sup> Zong Liang (宗良), “血虧病者之狀態及其治療法” [The Symptoms of those Who Suffer from Anemia and How to Treat Them], 婦女雜誌 [The Ladies’ Journal] 3, no. 11 (1917): 29.

that this is primarily due to iron deficiency (須知血球之主要成分為鐵).<sup>67</sup> This is followed by examples such as the lack of iron in food and the body's inefficiency in absorbing iron, identifying them as markers of anemia (故吾人食物中之鐵. 若供給不足以應需要, 或吾人體力不能吸收多量之鐵質, 即為血虧之病根矣).<sup>68</sup> Bioscientific underpinnings of personal health care and nutrition are vividly clear in this piece, as female debility is given a firm grounding in scientific logic. Naturally, such a discussion leaves no room for *feiren* even at this early stage, as a beleaguered body can be fortified through proper nutrition and lifestyle changes according to the needs of the female body.

From a bioscientific perspective, the medical body of a woman indeed differs from that of a man, and different manners of treating their debility are required. Important again is the absence of *feiren* and its variations from all of the above articles, advertisements and stories of the Republican period. All seen as *bingzhe*, this shows that impaired women's bodies (just as those of their male counterparts) experienced a de-essentialization as China embarked on a complex process of incorporation and innovation, ultimately creating its own variety of scientifically-objective biomedicine.

## Conclusion

*Feiren*'s gradual, yet significant disappearance from Chinese medical journalism between the late Qing to mid-Republican periods is a key phenomenon in understanding historical impairment in China. References to debility in late Qing popular media often drew from hearsay, relating stories of wonderment and disgust, colored heavily by Confucian morality.

Comparatively, discussions using the descriptor *feiren* were few during the twilight years of

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<sup>67</sup> Ibid.

<sup>68</sup> Ibid; For women *bingzhe* in an emotional context, see “寄與我的同病者: 悼影” [Written to those Who Suffer a Similar Affliction: A Mournful Reflection], 婦女雜誌 [The Ladies' Journal] 14, no. 2 (1928).

empire. But this quickly changed after 1912, as China's various projects of modernization placed the impaired medical body strictly in the crosshairs of reform. By the 1920s, *feiren* appeared ubiquitously throughout contemporary medical journalism, mostly under the auspices of looming shifts in Chinese medicine. The 1930s represented a watershed decade, where widely-read newspapers like Shenbao and, to a lesser extent, Da Gongbao began publishing companion medical weeklies. It is in these weeklies that early twentieth-century China's fervent engagement with new concepts and ideas, influenced by Western biomedicine, began to accelerate. Yet, the concept of *feiren* is nowhere to be found in these texts. Descriptions of debility are always made in context of possible medicinal treatments and cures, suggesting a greater understanding that impairment is not a stagnant ontology essential to individuals themselves. Rather, that it is a mutable state of being that does not relegate impaired bodies to the status of "garbage." These impaired bodies instead become active participants in nationwide conversations about health, medicine, and the state. Interactions with and writings about them accentuate avant-garde voices of the modern Chinese subject. Such voices touted prime physical and mental health as being synonymous with a strong, resilient nation and race.

Under such social, political, and cultural conditions, the continued use of *feiren* to denote impaired bodies was perhaps too abrasive for a new nation bent on self-strengthening. The texts analyzed in this paper may well be seen as those that politicized debility and the bodies which experienced it. And while *feiren* did continue to appear in stories and popular writings outside of medical journalism, these instances merely reflect a cultural-historical *modus operandi*. It is the term's vanishing from discussions of medicine that truly signals a shift in Chinese discourses of the impaired medical body. This, until now, has yet to be a topic of scholarly debate.

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